

JAN 19 2006

Atty Docket No. 022176-000210US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Dionne N Harvey

Group Art Unit 2643

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Dionne N Harvey

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of ADNAN SHENNIB, Application No. 10/786,502, filed February 24, 2004 for CANAL HEARING DEVICE WITH TUBULAR INSERT are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal (1 page)
2. Amendment (10 pages)
3. Replacement Drawings (1 sheet)

Number of pages being transmitted, including this page: 13

Dated: 1/19/06



Shemekia N. Brown

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3785

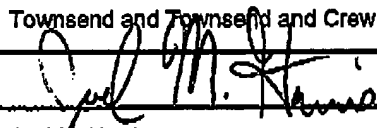
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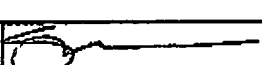
JAN 19 2006

PTO/BB/21 (08-04)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/786,502	
	Filing Date	February 24, 2004	
	First Named Inventor	SHENNIB, ADNAN AHMED	
	Art Unit	2643	
	Examiner Name	Dionne N Harvey	
Total Number of Pages in This Submission	12	Attorney Docket Number	022178-000210US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Replacement Drawing (1 page) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Joel M. Harris		
Date	01/19/06	Reg. No.	44,743

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PATENT
Attorney Docket No.: 022176-000210US
Client Ref. No.: IHS-002.A

TOWNSEND and TOWNSEND and CREW LLP

By: 

Shemekia N. Brown

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ADNAN SHENNIB

Application No.: 10/786,502

Filed: February 24, 2004

For: CANAL HEARING DEVICE WITH
TUBULAR INSERT

Customer No.: 20350

Confirmation No. 4013

Examiner: Dionne N Harvey

Technology Center/Art Unit: 2643

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 10/19/05, please enter the following
amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Amendments to the Drawings begin on page 7 of this paper and included an attached
replacement sheet.

Remarks/Arguments begin on page 8 of this paper.